

FILED

April 10, 2003

NEW JERSEY STATE BOARD
OF MEDICAL EXAMINERS

STATE OF NEW JERSEY
DEPARTMENT OF LAW & PUBLIC SAFETY
DIVISION OF CONSUMER AFFAIRS
STATE BOARD OF MEDICAL EXAMINERS

In the Matter of

ADAM M. MEYERS, D.O.

CONSENT ORDER

This matter was opened before the New Jersey State Board of Medical Examiners (the "Board") upon the Board's receipt of information that suggested that respondent Adam M. Meyers, D.O., had prescribed controlled dangerous substances (hereinafter "CDS") without good cause to patients A.D., C.N. and J.V. Respondent Meyers appeared before a Committee of the Board on November 27, 2002, and then testified concerning his prescription practices generally and offered specific testimony concerning his prescribing for the three identified patients.

The Board has had opportunity to *review* respondent's testimony, respondent's patient records, and all available investigative information, and hereby finds that respondent prescribed CDS without good cause to each of the three patients identified by initial above. The Board additionally finds that respondent failed to maintain adequate patient records for each of the three identified patients, and finds that, in each of the three cases, respondent failed to document necessary information concerning

the prescriptions he wrote in the patient chart (and/or failed to keep copies of prescriptions written), to include detail concerning the quantity and strength of CDS prescribed.

The Board further finds that, In the case involving patient A.D., respondent failed to recognize and properly treat addiction, over-prescribed narcotics; wrote post-dated prescriptions; and failed to make appropriate referrals, to include referrals to addiction specialists or psychiatrists.

In the case involving patient J.V., the Board additionally found that respondent prescribed narcotics without good cause to a person with a drug abuse history and with multiple failed attempts at rehabilitation; failed to recognize and properly treat addiction; and failed to make appropriate referrals, to include referrals to addiction specialists or psychiatrists.

Finally, in the case involving patient C.N., the Board additionally found that respondent treated and prescribed narcotics without examining the patient or maintaining patient records.

Based on the above findings, the Board concludes that basis for disciplinary sanction against respondent exists pursuant to N.J.S.A. 45:1-21 (h) and (m). Respondent enters into this Consent Order for the purpose of resolving all issues currently pending before the Board and in doing so neither admits nor denies the Board's findings. The parties desiring to resolve this matter without formal disciplinary proceedings, and the Board being

satisfied that the within resolution is in the public interest and adequately protects the public health, safety and welfare, and for good cause shown:

IT IS on this 10th day of April , 2003

ORDERED AND AGREED:

1. The license of respondent Adam M. Mayers to practice medicine and surgery in the State of New Jersey is hereby suspended for a period of three years, commencing on May 1, 2003. The first six months of the licensure suspension (from May 1, 2003 through October 31, 2003) shall be a period of active suspension, and the remaining two years and six months (from November 1, 2003 through April 30, 2006) shall be stayed and served as a period of probation, provided that respondent complies with all terms and conditions of this Order.
2. Respondent shall refrain from engaging in any medical practice, in New Jersey or elsewhere, during the period of active suspension, and shall, during the period of active suspension, attend and successfully complete courses acceptable to the Board in the proscribing of controlled dangerous substances and in record-keeping. Respondent shall additionally attend and successfully complete a course or program of not less than forty hours duration in addiction medicine.
3. Prior to resuming any practice of medicine in the State of New Jersey, whether during the period of probation or at any time

after the conclusion of the period of suspension, respondent shall be required to appear before a Committee of the Board, and then demonstrate that he has complied with all terms and conditions of this Order, to include having obtained all re-education required by operation of paragraph 2 above. The Board explicitly reserves the right to then place, by way of supplemental Order, any conditions and/or limitations which the Board shall deem appropriate upon any further practice of medicine by respondent, to include, without limitation, possible imposition of a requirement that respondent make his patient records readily available for periodic random monitoring by the Board through its Medical Director or other designee.

NEW JERSEY STATE BOARD
OF MEDICAL EXAMINERS

By:

William V. Harrer M.D. B.L.D.
William V. Harrer, M.D., B.L.D.
Board President

I represent that I agree to be bound by the terms of this Order, Consent is hereby given to the Board to enter this Order.

Adam M. Meyers
Adam M. Meyers, D.O.

A licensee whose license has been **revoked, suspended** for one (1) year or more or permanently surrendered must remove signs and take affirmative action to stop advertisements **by** which his/her eligibility to practice is represented. The licensee must also take **steps** to remove his/her name from **professional** listings, telephone directories, professional stationery, or billings. If **the** licensee's name **is** utilized in a group practice title, it shall be deleted. Prescription **pads** bearing the licensee's name shall **be** destroyed. A destruction report form obtained from the Office of Drug Control (973-504-6558) must be filed. If no other licensee **is** providing services at the location, all medications must be removed and returned to the manufacturer, if possible, destroyed or safeguarded. (In situations where a license has been **suspended** for **less** than one year, prescription pads **and** medications need not be destroyed but must **be** secured in a locked place for safekeeping.)

3. Practice Income Prohibitions/Divestiture of Equity Interest in Professional Service Corporations and Limited Liability Companies

A licensee shall not charge, receive or share in any fee for professional services rendered **by** him/herself or others while barred from engaging in the professional practice. The licensee **may be** compensated for the reasonable value of **services** lawfully rendered and disbursements incurred on a patient's behalf prior to the effective **date** of the Board action.

A licensee **who is** a shareholder in a professional service corporation organized to engage in the professional practice, whose license is revoked, surrendered or suspended for a term of one (1) year or more shall be deemed to be disqualified from the practice within the meaning of the Professional Service Corporation Act. (N.J.S.A. 14A:17-11). A disqualified licensee **shall** divest him/herself of all financial **interest** in the professional service corporation pursuant to N.J.S.A. 14A:17-13(c). A licensee who **is** a member of a limited liability company organized pursuant to N.J.S.A. 42:1-44, shall divest him/herself of all financial interest. Such divestiture shall occur within 90 days following the the entry of the Order rendering the licensee disqualified to participate in the applicable form of ownership. Upon divestiture, a licensee shall forward to the Board a copy of documentation forwarded to the Secretary of State, Commercial Reporting Division, demonstrating that the interest **has been** terminated. If the licensee is the sole shareholder in a professional service corporation, the corporation must **be** dissolved within 90 days of the licensee's disqualification.

4. Medical Records

If, as a result of the Board's action, a practice is closed or transferred to another location, the licensee shall ensure that during the three (3) month period following the effective date of the disciplinary order, a message will **be** delivered to patients calling the Former office premises, advising where records may **be** obtained. The message should inform patients of the names and telephone numbers of the licensee (or his/her attorney) assuming custody of the records. The same information shall also be disseminated **by** means of a notice to **be published** at least once per month for three (3) months in a newspaper of

general circulation in the geographic vicinity in which the practice was conducted. At the end of the three month period, the licensee shall file with the Board the name and telephone number of the contact person who will have access to medical records of former patients. Any change in that individual or his/her telephone number shall be promptly reported to the Board. When a patient or his/her representative requests a copy of his/her medical record or asks that record be forwarded to another health care provider, the licensee shall promptly provide the record without charge to the patient.

5. Probation/Monitoring Conditions

With respect to any licensee who is the subject of any Order imposing a probation or monitoring requirement or a stay of an active suspension, in whole or in part, which is conditioned upon compliance with a probation or monitoring requirement, the licensee shall fully cooperate with the Board and its designated representatives, including the Enforcement Bureau of the Division of Consumer Affairs, in ongoing monitoring of the licensee's status and practice. Such monitoring shall be at the expense of the disciplined practitioner.

(a) Monitoring of practice conditions may include, but is not limited to, inspection of the professional premises and equipment, and inspection and copying of patient records (confidentiality of patient identity shall be protected by the Board) to verify compliance with the Board Order and accepted standards of practice.

(b) Monitoring of status conditions for an impaired practitioner may include, but is not limited to, practitioner cooperation in providing releases permitting unrestricted access to records and other information to the extent permitted by law from any treatment facility, other treating practitioner, support group or other individual/facility involved in the education, treatment, monitoring or oversight of the practitioner, or maintained by a rehabilitation program for impaired practitioners. If bodily substance monitoring has been ordered, the practitioner shall fully cooperate by responding to a demand for breath, blood, urine or other sample in a timely manner and providing the designated sample.